

## **Application Data Sheet**

### **APPLICATION INFORMATION**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?::

Computer Readable From (CRF)?:: No

Number of Copies of CRF::

Title:: SURGICAL MANIPULATOR

Attorney Docket Number:: 225929

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 8

Small Entity?:: Yes

Latin Name::

Variety denomination name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **APPLICANT INFORMATION**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Steve  
Middle Name:: T  
Family Name:: Charles  
Name Suffix::  
City of Residence:: Germantown  
State or Prov. of Residence:: TN  
Country of Residence:: US  
Street of mailing address:: 3220 Oak Manor  
City of mailing address:: Germantown  
State or Province of mailing address:: TN  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 38138  
Inventor Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: J.  
Middle Name:: Michael  
Family Name:: Stuart  
Name Suffix::  
City of Residence:: Corrales  
State or Prov. of Residence:: NM  
Country of Residence:: US  
Street of mailing address:: 46 Judy Court  
City of mailing address:: Corrales  
State or Province of mailing address:: NM  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 87048  
Inventor Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Larry

Middle Name::  
Family Name:: Bronisz  
Name Suffix::  
City of Residence:: Los Alamos  
State or Prov. of Residence:: NM  
Country of Residence:: US  
Street of mailing address:: 1618 Camino Uva  
City of mailing address:: Los Alamos  
State or Province of mailing address:: NM  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 87544

#### **CORRESPONDENCE INFORMATION**

Correspondence Customer Number:: 23460  
Phone:: (312) 616-5600  
Fax:: (312) 616-5700  
E-mail Address:: mail@leydig.com

#### **REPRESENTATIVE INFORMATION**

Representative Customer Number:: 23460

#### **DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is a	Continuation of	10/050,241	January 16, 2002
which claims benefit	Non Provisional of	60/261,940	January 16, 2001
of			

## **ASSIGNEE INFORMATION**

Assignee name:: MicroDexterity Systems, Inc.

Street of mailing address:: 6401 Poplar Avenue

Suite 190

City of mailing address:: Memphis

State or Province of  
mailing address:: TN

Country of mailing  
address:: US

Postal or Zip Code of  
mailing address:: 38119